NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: _~~~~~~~~~~~~~~~_

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	-	Total
	Sm./Lg				Sm Entry	Lg Entry		
Basic Filing Fee	201/101				___	✓	·	1290
Total Claims >20	203/103	38 - 20 - 18	X		___	18	·	324
Independent Claims >3	202/102	___ - 3 - ___	X		___	___	,	___
Mult. Dep Claim Present	204/104				___	200	·	200
Surcharge	205/105				___	130	·	130
English Translation	130							___

TOTAL FEE CALCULATION

1814

Fees due upon filing the application

Total Filing Fees Due = $ 1814.00

Less Filing Fees Submitted . $ _____

BALANCE DUE = $ 1814.00

~~signature~~
Office of Initial Patent Examination

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS 30	30 minus 20=	* 13
INDEPENDENT CLAIMS 2	minus 3 =	* —
MULTIPLE DEPENDENT CLAIM PRESENT	✓	

	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
	RATE	FEE	OR	RATE	FEE
BASIC FEE		345.00	OR		690.00
	X$ 9=		OR	X$18=	234
	X39=		OR	X78=	
	+130=		OR	+260=	260
	TOTAL		OR	TOTAL	1184

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
	X$ 9=		OR	X$18=	
	X39=		OR	X78=	
	+130=		OR	+260=	
	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.